

**State of Connecticut
Department of Economic & Community Development**

SMALL CITIES COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

QUARTERLY GRANTEE PROGRESS REPORT

Grantee Name: Ledyard

Reporting Period:
From: 10/01/12

Grant Number: SC1107201

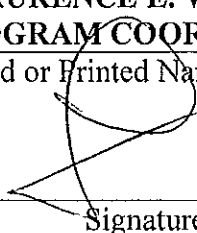
To: 12/31/12

THE GRANTEE CERTIFIES THAT:

- (a) To the best of its knowledge and belief the data in this report was true and correct as of dates shown above.
- (b) The required records are being maintained and will be made available upon request.
- (c) Federal assistance made available under the Small Cities CDBG Program is not being utilized to reduce substantially the amount of local Financial Support for community development activities below the level of such support prior to the start of the CDBG Program Year.

Prepared By:
LAURENCE E. WAGNER
PROGRAM COORDINATOR

Typed or Printed Name and Title



Signature

1/24/13
Date

(203) 573-1188
Tel. No.

Local Authorized Official:
JOHN A. RODOLICO
MAYOR

Typed or Printed Name and Title



Signature

1-29-13
Date

(203) 468-3204
Tel. No.

SUPPORTING NARRATIVE

PROGRESS ON PLANNED ACTIVITIES

For each program activity, briefly describe its current status. The description should combine a narrative of your progress and accomplishments of your activities.

Any special circumstances or problems that have kept you from meeting the Program Schedule submitted with your application should be explained.

Please attach any additional information such as newspaper clippings, pictures, etc.

Project # 072-02

A Certificate of Completion was issued on October 12, 2012 for the rehab performed on this manufactured home. The scope of work was to replace the kitchen floor and construct new egress stairs at the back entry.

The owner contacted the Town after the project was completed asked to have his furnace replaced. The Owner is soliciting his own prices to expedite the installation in view of the time of year. Contracts will be signed once the owner provides the three quotes.

Project # 072-03

Funding was provided to this elderly female headed household to perform various general repairs to her property. The scope of work included the installation of replacement windows, fire rating of the garage, extensive electrical repairs, and minor carpentry. The project was completed by RER Associates of Willington on November 14, 2012 within budget and on time.

During the course of construction the owner had her furnace serviced and was advised to consider replacement of the boiler within the coming year.

The replacement of the heating system is being replaced as a second phase. Bids were received for the replacement of the boiler, and domestic water heater on December 21, 2012. The owner has agreed to pay additional the difference between the low bidder and the second bidder in order to hire a local contractor. The low bidder from Manchester and the owner felt more comfortable having the work done by a local contractor. The contracts will be signed in early January.

Project # 072-04

Work on this manufactured home is substantially complete. The scope of work included installing a new rubber roof; replace brittle plastic piping which often burst with new PEX piping. The tub, diverter and surround were replaced with a low flow diverter and fiberglass surround unit. The floors in the bathroom and kitchen were replaced with vinyl tiles. GFCI outlets and smoke detectors were installed as part of the electrical upgrades. During the course of construction the owner stated that her windows were leaking and

she was getting water in the house. A change order was approved authorizing the contractor to install head flashing over the windows on the exterior of the building in an attempt to stop the water. The repair was successful on all but one window. The owner and contractor are working together to try to identify the location of the leak. The project will remain open until the window issue is resolved.

Project # 072-06

Trying to address all of the needs of this manufactured home within the \$10,000.00 local program cap for manufactured homes is not possible. The property deficiencies include installing hurricane tie down straps to the unit, roofing repairs/replacement, replacing the existing single pane windows with double pane windows, replacing the entry doors, replacing a non functional hot air furnace and leaking hot water heater, replacing a cracked bath tub, installing a new toilet and shower diverter, correcting electrical violations and various carpentry associated repairs.

The Town worked with the owner over the past quarter in resolving title issues and back taxes. As a result of that the first phase of rehab, replacing the furnace and hot water heater, was bid and contracts were signed on December 21, 2012 between the owners and SK Mechanical of Manchester in the amount of \$ 3,725.00. The contractor has pulled his permit and is waiting for the delivery of the materials. Once all materials are received the job will be schedule and completed. T

The owners were referred to the United Illuminating CTEHHI Program in an attempt to leverage funding for eligible repairs. Unfortunately the unit was not eligible for assistance through that Program. The next phase will be the tie downs and roof repairs.

Project # 072-08

Bids were received for the replacement of the boiler, domestic water heater and oil tank on December 21, 2012. The owner has opted to pay additional the difference between the low bidder and the second bidder in order to hire a local contractor instead of the low bidder from Manchester. Contracts will be signed in early January.

Project # 072-09

Bids were received for the replacement of the boiler, domestic water heater and oil tank on December 21, 2012. The low bid from Barry Associates was accepted by the owner and contracts will be signed in early January.

Project # 072-10

Several meeting and discussion have occurred with this owner during the past quarter. The scope of work has been revised several times and then even after seemingly agreeing on the scope of work the ensuing specifications were then revised again at the request of the owner. The property has been lead tested and we are awaiting the results of the testing. The property is a manufactured home that has a variety of needs which will most likely exceed the 10,000 cap established by the Town for manufactured homes.

The most recently discussed and agreed upon scope of work includes replacing the hot air furnace, installing and insulating duct work, upgrades to the electrical service, adding electrical circuitry and outlets, install an exhaust fan in the kitchen, installing egress

windows in the bedrooms and replacing several other windows in the house and installing vinyl siding on the addition.

Project 072-11

The project is on hold until the owner can pay delinquent mortgage payments.

Project 072-12

Pending initial inspection

Project 072-13

Pending initial inspection

Project # 072-14

The Town has determined this property ineligible due to the severe circumstances which surround this project. The property is a manufactured home occupied by an elderly female. The roof is leaking in several locations with signs of mold on the walls and ceilings. The siding door does not close completely and the existing windows are single pane and in poor condition. The cabinets and counter tops are in a state of disrepair. The floor in the bathroom is rotted and the toilet is pitched as a result of it. The Town is working with the Social Service agency to try and place the owner in public housing.

Project 072-15

Pending initial inspection

Project # 072-16

The engineer's first design of the septic system repair was rejected by the Health Department for various reasons and is in the process of being redesigned. Once the redesign is complete and approved the project will be put out to public bid.

Project # 072-17

An initial inspection was performed on this property and the owners qualified for assistance. The owner is requesting funding to repair a faulty septic system. Several attempts have been made to contact the Health Department to discuss the property and design requirements. Once a meeting can be arranged and the project discussed the design requirements can be determined and if necessary a RFP for an engineered septic design will be issued. If the property does not require an engineered system then soil testing will be performed and the project will be bid to septic contractors on a design build basis.

Project # 072-18

An initial inspection was performed on this property and the owners qualified for assistance. The owner is requesting funding to replace her existing wood siding with vinyl siding and replace the front entry door. A lead paint test was ordered and once the report is received the specifications will be finalized and the project bid.

**HOUSING ACTIVITIES
BENEFICIARY DATA REPORT
PROGRAM YEAR START DATE (7/1) THROUGH THIS QUARTER**

Complete this report for all housing activities. Report the beneficiaries as households. Do not report any data for prior program years.

Name of Activity: Housing Rehabilitation

Enter the total number of households: 2

INCOME DATA

	Owner	Renter
1. Total number of Extremely Low Income Households (Income does not exceed 30% of area median income)	_____	_____
2. Total number of Low Income Households (Income exceeds 30% but does not exceed 50% of area median income)	<u>1</u>	_____
3. Total number of Moderate-Income Households: (Income exceeds 50% but does not exceed 80% of area median income)	<u>1</u>	_____
4. Total number of Non Low- and Moderate-Income Households: (Income exceeds 80% of area median income)	_____	_____

OWNER/RENTER, RACIAL, ETHNIC, & FEMALE-HEADED HOUSEHOLD DATA

Report the racial/ethnic data separately for the owners and renters that were assisted by this housing activity. Use the race/ethnicity of the head-of-household to determine the race of the household. The total households in the "All" column of the "Total" section of the table must equal the total number of households. Report the number of female-headed households.

1. Racial and Ethnic Classifications

Racial Classification	Owner		Renter		Total	
	All	Hisp	All	Hisp	All	Hisp
White	2				2	
Black/African American						
Asian						
American Indian/Alaskan Native						
Native Hawaiian/Other Pacific Islander						
American Indian/Alaskan Native & White						
Asian & White						
Black/African American & White						
American Indian/Alaskan Native & Black/African American						
Other Multi-Racial						
Totals:					2	

2. Number of Female-Headed Households. 1 1

**HOUSING REHABILITATION ACTIVITIES
PERFORMANCE MEASUREMENTS REPORT
PROGRAM YEAR START DATE (7/1) THROUGH THIS QUARTER**

Complete this report for all housing rehabilitation activities. Do not report any data for prior program years.

Name of Activity: Housing Rehabilitation

TOTAL RENTAL UNITS

1) Total rental units rehabilitated during the program year through this quarter:	
2) Rental units that are subject to affordability requirements:	
3) Section 504 accessible rental units that were rehabilitated (units must be fully accessible under UFAS standards):	
4) Rental units that were brought from substandard to standard condition:	
5) Rental units that were qualified as Energy Star:	
6) Rental units that were brought into compliance with lead safety rules:	
7) Rental units that were created by converting non-residential buildings to residential buildings.	

AFFORDABLE RENTAL UNITS

1) Number of years of affordability:	
2) Affordable rental units occupied by the elderly:	
3) Affordable rental units subsidized by Federal, State, or Local project-based rental assistance:	
4) Affordable rental units designated for persons with HIV/AIDS (including those units that are subsidized by project based rental assistance or other assistance for services and/or operations):	
5) Affordable rental units designated for persons with HIV/AIDS who are chronically homeless (This is a sub-set of the units reported on line 4.):	
6) Affordable rental units that provide permanent housing for homeless persons and families (including those units that are subsidized by project-based rental assistance or other assistance for services and/or operations):	
7) Affordable rental units that provide permanent housing for homeless persons and families who are chronically homeless (This is a sub-set of the units reported on line 6.):	

OWNER-OCCUPIED UNITS

1) Total Owner-occupied units rehabilitated during the program year through this quarter:	2
2) Owner-occupied units occupied by the elderly:	2
3) Owner-occupied units that were brought from substandard to standard condition:	2
4) Owner-occupied units that were qualified as Energy Star:	0
5) Owner-occupied units that were made accessible through the elimination of architectural barriers (units do not need to be fully accessible under UFAS standards):	0
6) Owner-occupied units that were brought into compliance with lead safety rules:	2

PROGRESS ON LEVERAGING OF FUNDS

Only complete this form if your original application or approved amendments propose to leverage other private or public funds. Examples of leveraged dollars include the bank or homeowner share of a rehabilitation loan, funding from other state departments or your Town, which is combined with CDBG funds to make a project possible, etc. This form must be completed if your application proposed leveraging funds, even if no funds have actually been leveraged to date.

Source of Funds	(1) <u>Budgeted</u>	(2) Funds <u>In Place</u>	(3) Funds <u>Leveraged</u>	(4) <u>Anticipated</u>
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- (1) The budgeted amount should reflect the amount of funds to be leveraged as shown in your Small Cities application or as amended.
- (2) Funds in place should reflect the amount of funds in the possession of the Town and/or available to be combined with the CDBG funds.
- (3) This column should reflect the actual amount of non-CDBG funds already leveraged.
- (4) This should reflect the funds not yet available to the town but which are anticipated.

PART A

CONTRACT AND SUBCONTRACT ACTIVITY – THIS QUARTER

Grantee Name: Ledyard DECD Grant Number: SC1107201 10 / 01 12 through 12 31 / 12

Project Name or Number	Amount of Contract	Type Of Trade (1-3)	Racial/Ethnic Code (1-6)	Woman Owned (yes/no)	Section 3 Firm (yes/no)	Contractor ID Number Or S.S. Number	Subcontractor ID Number or S.S. Number *	Name	Street	City	State	Zip Code

Instructions:

1. Report all of the contracts and subcontracts that were executed since the start date of this activity.
2. Trade: (1) Construction (2) Education/Training (3) Other
3. Racial Code: (1) White Americans, (2) Black Americans, (3) Native Americans, (4) Hispanic Americans, (5) Asian/Pacific Americans, (6) Hasidic Jews
4. Use Social Security # only if contractor does not have an IRS Identification Number
5. Designate a Small Business Enterprise (SBE) with an asterisk (*).
6. If subcontractors are being used, list the general contractor first followed by each subcontractor.

PART B

CONTRACT AND SUBCONTRACT ACTIVITY – FEDERAL FISCAL YEAR START DATE (10/1) THROUGH THIS QUARTER

Grantee Name: Ledyard DECD Grant Number: SC1107201 10 / 01 / 11 through 12 / 31 / 12.

Project Name or Number	Amount of Contract	Type Of Trade (1-3)	Racial/Ethnic Code (1-6)	Woman Owned (yes/no)	Section 3 Firm (yes/no)	Contractor ID Number Or S.S. Number	Subcontractor ID Number or S.S. Number *	Name	Street	City	State	Zip Code
	\$50,000.00	3	1	No	No	06-1330300		L. Wagner & Associates, Inc.				
072-02	1,900.00	1	1	No	No	45-2565663		Brownstone Contracting				
072-03	19,425.00	1	1	No	No	06-1549227	*	10 Lynde Street, Old Saybrook, CT 06475				
072-04	8,949.00	1	1	No	No		*	RER Associated LLC				
072-16	4,960.00	3	1	No	No	06-1180153	*	75 Lustig Road, Willington, CT 06279				
								DEF Service Group Ltd				
								1171 Volunton Rd, Griswold, CT 06351				
								Robert A. Green Associates				
								6 Old Waterbury Road, Terryville, CT 06786				

Instructions:

1. Report all of the contracts and subcontracts that were executed since the start date of the Federal Fiscal Year.
2. Trade: (1) Construction (2) Education/Training (3) Other
3. Racial Code: (1) White Americans, (2) Black Americans, (3) Native Americans, (4) Hispanic Americans, (5) Asian/Pacific Americans, (6) Hasidic Jews
4. Use Social Security # only if contractor does not have an IRS Identification Number
5. Designate a Small Business Enterprise (SBE) with an asterisk (*).
6. If subcontractors are being used, list the general contractor first followed by each subcontractor.

PROGRAM INCOME STATEMENT

ONLY COMMUNITIES GENERATING PROGRAM REVENUE (PR) NEED TO COMPLETE THIS FORM

Reporting Period: 10/1/2012 TO 12/31/2012 Community: Ledyard

Report Prepared By: L. Wagner & Associates, Inc.

PROGRAM REVENUE FOR THE QUARTER		PROGRAM INCOME BALANCES & EXPENDITURES			ACTIVITY		
Program Revenue For The Quarter	Bank Interest Earned	RLA and Program Income (PI) Accounts		Program Income Expended	Balance	Activity on which PI was expended	Accomplishments achieved w/PI funded activities [# people asst, % L/M # units rehabed, etc.] and National Obj.
		Beginning Balance (2)	Total PI Deposited This Quarter				
{1}	{2a}	{3a}	{3b}	{4}	{5}	{6}	{7}
TOTAL							

(1) List source of Program Revenue (PR) e.g. repayment from a specific grant, repayment from a Revolving Loan Account (RLA) or repayment from Program Income fund account.

(2) The beginning Balance is the ending Balance reported on the most recent previous PI Report, whether Annual or Quarterly. List accounts separately.

(3) PI expended should be listed in this column, do not list the expenditure of Miscellaneous Revenue (MR) (see Chapter 9 page 9-2 of the Grant

ANNUAL PROGRAM INCOME STATEMENT

ONLY COMMUNITES GENERATING PROGRAM REVENUE (PR) NEED TO COMPLETE THIS FORM

Reporting Period: 07/01/12 TO 6/30/2013

Community: Ledyard

Report Prepared By: L. Wagner & Associates, Inc.

PROGRAM REVENUE FOR THE QUARTER		PROGRAM INCOME BALANCES & EXPENDITURES				ACTIVITY		
Program Revenue For The Quarter	Bank Interest Earned	Total Program Revenue	RLA and Program Income (PI) Accounts		Program Income Expended	Balance	Activity on which PI was expended	Accomplishments achieved w/PI funded activities [# people asst, % L/M # units rehabed, etc.] and National Obj.
			Beginning Balance (2)	Total PI Deposited This Year				
{1}	{2a}	{2b}	{3a}	{3b}	{4}	{5}	{6}	{7}
TOTAL								

(1) List source of Program Revenue (PR) e.g. repayment from a specific grant, repayment from a Revolving Loan Account (RLA) or repayment from a Program Income fund account.
 (2) The beginning Balance is the ending Balance reported on the most recent previous PI Report, whether Annual or Quarterly. List accounts separately
 (3) PI expended should be listed in this column, do not list the expenditure of Miscellaneous Revenue (MR) (see Chapter 9 page 9-2 of the Grant Management Manual for definition of MR).

Quarterly Report

State of Connecticut Department of Economic and Community Development

1. Name of Grantee: TOWN OF LEDYARD
 2. Grant Number: SC1107201
 3. HUD Grant Number: 072-SC-11
 4. Reporting Period: 2012 to 12/31/2012

Page 1 of 3

Line	Original Amt Approved	Current Amt Approved	Amount Encumbered	Advances Received * this Quarter	YTD	Amt Expended this Quarter	YTD
1a. ACQUISITION OF REAL PROPERTY							
b. Program Costs							
2a. DISPOSITION							
b. Program Costs							
3a. CLEARANCE AND DEMOLITION							
b. Program Costs							
4. COMMUNITY FACILITIES AND IMPROVEMENTS							
a. Senior Centers							
b. Program Costs							
c. Recreational Facilities							
d. Program Costs							
e. Centers for the Handicapped							
f. Program Costs							
g. Neighborhood Facilities							
h. Program Costs							
5. WATER/SEWER/FLOOD AND DRAINAGE							
a. Water Facilities							
b. Program Costs							
c. Sewer Facilities							
d. Program Costs							
e. Flood & Drainage Facilities							
f. Program Costs							
g. Assessments							
h. Program Costs							
i. Other Utilities							
j. Program Costs							
6. STREETS							
a. Street Improvements							
b. Program Costs							

Quarterly Report

State of Connecticut Department of Economic and Community Development

1. Name of Grantee: TOWN OF LEDYARD

2. Grant Number: SC1107201

3. HUD Grant Number: 072-SC-11

4. Reporting Period: '2012 to 12/31/2012

Page 2 of 3

Line	Original Amt Approved	Current Amt Approved	Amount Encumbered	Advances Received * this Quarter	YTD	Amt Expended this Quarter	YTD
c. Sidewalk/Ped.Malls/Streetscape							
d. Program Costs							
e. Parking Facilities							
f. Program Costs							
7a. INTERIM EMERGENCY REPAIRS							
b. Program Costs							
8a. OTHER PUBLIC FACILITIES							
b. Program Costs							
9a. REMOVAL OF ARCHITECTURAL BARRIERS							
b. Program Cost							
10a.PUBLIC/SOCIAL SERVICES							
b. Program Costs							
11a.APPROVED URBAN RENEWAL							
b. Program Costs							
12a.RELOCATION							
b.Program Costs							
13. REHABILITATION/PRESERVATION AND HOUSING ACTIVITIES							
a. Rehabilitation of Public Residential Structures							
b. Program Costs							
c. Rehabilitation of Private Residential Structures	\$225,000.00	\$225,000.00	\$0.00	\$33,000.00	\$33,000.00	\$231.00	\$35,465.00
d. Program Costs	\$55,000.00	\$55,000.00	\$0.00	\$7,000.00	\$19,000.00	\$6,003.90	\$18,173.90
e. Code Enforcement							
f. Program Costs							
g. Historic Preservation							
h. Program Costs							
i.Construction of Housing-Sec 17							
j. Program Costs							
k. Public Housing Modernization							
l. Program Costs							

Quarterly Report

State of Connecticut Department of Economic and Community Development

1. Name of Grantee: TOWN OF LEDYARD
 2. Grant Number: SC1107201
 3. HUD Grant Number: 072-SC-11
 4. Reporting Period: 2012 to 12/31/2012

Page 3 of 3

Line	Original Amt Approved	Current Amt Approved	Amount Encumbered	Advances Received * this Quarter	YTD	Amt Expended this Quarter	YTD
m. Rehabilitation of Commercial Buildings							
n. Program Costs							
14. ECONOMIC DEVELOPMENT ACTIVITIES							
a. Job Creation/Retention for Private For-Profit Corp.							
b. Program Costs							
c. Job Creation/Retention for Private Non-Profit Corp.							
d. Program Costs							
15a. SPECIAL ACTIVITIES BY NON-PROFIT CORP.							
b. Program Costs							
16a. DOWNPAYMENT ASSISTANCE							
b. Program Costs							
18. PLANNING							
a. Development of a Comprehensive Community Development Plan							
b. Program Costs							
c. Development of a Policy-Mgmt-Capacity Building							
d. Program Costs							
e. Special Functional Planning Activities							
f. Program Costs							
19. GENERAL ADMINISTRATION							
a. General Management, Oversight and Coordination	\$20,000.00	\$20,000.00	\$0.00	\$1,200.00	\$9,900.00	\$1,200.00	\$5,400.00
b. Indirect Costs							
c. Citizen Participation							
d. Environmental Assessment							
20. CONTINGENCIES (Not to exceed 10% of total Grant amount)							
21. Total All Line Items	\$300,000.00	\$300,000.00	\$0.00	\$8,200.00	\$61,900.00	\$7,434.90	\$59,038.90

* Includes Pending Drawdowns

Section 3 Summary Report
 Economic Opportunities for
 Low- and Very Low-Income Persons

U.S. Department of Housing
 and Urban Development
 Office of Fair Housing
 and Equal Opportunity

OMB Approval No. 2529-0043
 (exp. 11/30/2010)

HUD Field Office:
Hartford

See back of page for Public Reporting Burden statement!

1. Recipient Name and Address: (street, city, state, zip)	2. Federal Identification: (grant no.)	3. Total Amount of Award:
	4. Contact Person: L. Wagner & Associates	5. Phone: (include area code) (203) 573-1188
	6. Length of Grant:	7. Reporting Period: 10/01/12 – 12/31/12
8. Date Report Submitted: 12/31/2012	9. Program Code: 8 (Use separate sheet for each program code)	10. Program Name: CDBG – State Administered

Part I: Employment and Training (Columns B, C and F are mandatory fields. Include New Hires in E & F)**

A Job Category	B Number of New Hires	C Number of New Hires that are Sec. 3 Residents	D % of Aggregate Number of Staff Hours of New Hires that are Sec. 3 Residents	E** % of Total Staff Hours for Section 3 Employees and Trainees	F** Number of Section 3 Trainees
Professionals					
Technicians					
Office/Clerical					
Construction by Trade (List Trade					
Trade					
Trade					
Trade					
Trade					
Other (List)					
Total					

*Program Codes
 1 = Flexible Subsidy
 2 = Section 202/811

3 = Public/Indian Housing
 A= Development
 B = Operation
 C = Modernization

4 = Homeless Assistance
 5 = HOME
 6 = HOME-State Administered
 7 = CDBG-Entitlement

8 = CDBG-State Administered
 9 = Other CD Programs
 10 = Other Housing Programs

Part II: Contracts Awarded

1. Construction Contracts:

A. Total dollar amount of all contracts awarded on the project	\$	
B. Total dollar amount of contracts awarded to Section 3 businesses	\$	
C. Percentage of the total dollar amount that was awarded to Section 3 businesses		%
D. Total number of Section 3 business receiving contracts		

2. Non-Construction Contracts:

A. Total dollar amount of all non-construction contracts awarded on the project/activity	\$	
B. Total dollar amount of non-construction contracts awarded to Section 3 businesses	\$	
C. Percentage of the total dollar amount that was awarded to Section 3 businesses		%
D. Total number of Section 3 businesses receiving non-construction contracts		

Part III: Summary

Indicate the efforts made to direct the employment and other economic opportunities generated by HUD financial assistance for housing and community development programs, to the greatest extent feasible, toward low- and very low-income persons, particularly those who are recipients of government assistance for housing. (Check all that apply.)

- Attempted to recruit low-income residents through: local advertising media, signs prominently displayed at the project site, contacts with the community organizations and public or private agencies operating within the metropolitan area (or nonmetropolitan county) in which the Section 3 covered program or project is located, or similar methods.
- Participated in a HUD program or other program which promotes the training or employment of Section 3 residents.
- Participated in a HUD program or other program which promotes the award of contracts to business concerns which meet the definition of Section 3 business concerns.
- Coordinated with Youthbuild Programs administered in the metropolitan area in which the Section 3 covered project is located.
- Other; describe below.

Public reporting for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB number.

Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u., mandates that the Department ensure that employment and other economic opportunities generated by its housing and community development assistance programs are directed toward low- and very low- income persons, particularly those who are recipients of government assistance housing. The regulations are found at 24 CFR Part 135. The information will be used by the Department to monitor program recipients' compliance with Section 3, to assess the results of the Department's efforts to meet the statutory objectives of Section 3, to prepare reports to Congress, and by recipients as self-monitoring tool. The data is entered into a database and will be analyzed and distributed. The collection of information involves recipients receiving Federal financial assistance for housing and community development programs covered by Section 3. The information will be collected annually to assist HUD in meeting its reporting requirements under Section 808(e)(6) of the Fair Housing Act and Section 916 of the HCDA of 1992. An assurance of confidentiality is not applicable to this form. The Privacy Act of 1974 and OMB Circular A-108 are not applicable. The reporting requirements do not contain sensitive questions. Data is cumulative; personal identifying information is not included.